

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | # | gfar | |
| FORMALITY REVIEW | S.H | 1085 | 5/23/01 |
| RESPONSE FORMALITY REVIEW | MH | JGK | 09/02/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
| 1 1 ✓ | 5/15/01 |
| 2 2 ✓ | 5/15/01 |
| 3 3 ✓ | 5/15/01 |
| 4 4 ✓ | 5/15/01 |
| 5 5 ✓ | 5/15/01 |
| 6 6 ✓ | 5/15/01 |
| 7 7 ✓ | 5/15/01 |
| 8 8 ✓ | 5/15/01 |
| 9 9 ✓ | 5/15/01 |
| 10 10 ✓ | 5/15/01 |
| 11 11 ✓ | 5/15/01 |
| 12 12 ✓ | 5/15/01 |
| 13 13 ✓ | 5/15/01 |
| 14 14 ✓ | 5/15/01 |
| 15 15 ✓ | 5/15/01 |
| 16 16 ✓ | 5/15/01 |
| 17 17 ✓ | 5/15/01 |
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| 19 19 ✓ | 5/15/01 |
| 20 20 ✓ | 5/15/01 |
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| 25 25 ✓ | 5/15/01 |
| 26 26 ✓ | 5/15/01 |
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| 29 29 ✓ | 5/15/01 |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

04/13.01